Part I: To be completed by APPLICANT (continued)

5.	Provide or attach a brief, but thorough description of the project. See attached project description
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Part II: To be completed by DEPARTMENT OF AGRICULTURE | BUREAU OF AQUACULTURE

This consultation form is required to be submitted as part of an application for a Structures, Dredging & Fill permit (section 22a-361 CGS) and/or Tidal Wetlands permit (section 22a-32 CGS) to the DEEP- OLISP. The application has not yet been submitted to the DEEP. Please review the enclosed materials and determine whether the project will significantly impact shellfish beds. You may also provide comments or recommendations regarding the proposal. Should you have any questions regarding this process, please call DEEP-OLISP at (860) 424-3034 to speak with the analyst assigned to the town in which the work is proposed. Please return the completed form to the applicant.

Section 22a-361(b) CGS requires that the Commissioner of the DEEP shall hold a public hearing on permit applications submitted pursuant to section 22a-361 CGS provided that a petition requesting such hearing signed by 25 or more persons is received **and** if the project will significantly impact any shellfish area, as determined by the Director of the Bureau of Aquaculture at the Department of Agriculture.

DEPARTMENT OF AGRICULTURE/ BUREAU OF AQUACULTURE DETERMINATION:	
Project located on (check one): natural bed state bed local bed none Tidal textured other, please specify:	
If project is located upon a franchised or leased shellfish bed, please provide the owner or lessee's contact information below. CT DOT SIKURKY ANDOW Emprovement.	
Check one of the following: I have determined that the work described in Part I of this form and attachments WILL NOT significantly impact any shellfish area.	
I have determined that the work described in Part I of this form and attachments WILL significantly impact any shellfish area and that a public hearing must be held if the DEP issues a public notice for the project as currently designed and a qualified petition is received.	
COMMENTS/RECOMMENDATIONS (or check here if attached:):	
As defined in narrathe workplans address our concerns.	
Davolt Care 4/24/2013	
Signature of Commission Representative Date Agriculture Divide	
Print Name of Commission Representative	